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FSA-2106 U.S. DEPARTMENT OF AGRICULTURE 01-20-04) Farm Service Agency		PART A - GENERAL INFORMATION	
GUARANTEED LOAN SERVICING FILE REVIEW QUESTIONNAIRE			
1. NAME OF BORROWER:			
A. LAST NAME		B. FIRST NAME	C. MIDDLE INITIAL
2. DATE (MM-DD-YYYY)	3. STATE CODE	4. COUNTY CODE	5. BORROWER IDENTIFICATION NO.
6. SERVICE CENTER MAIL CODE	7. DISTRICT NUMBER	8. STATE ABBREVIATION	9. TYPE OF LENDER <input type="checkbox"/> SEL <input type="checkbox"/> CLP <input type="checkbox"/> PLP
10. NAME OF LENDER			

PART B - REVIEWER'S INSTRUCTIONS						
All "NO" answers (and N/A when judged necessary by the reviewer) require a detailed explanation of the weaknesses identified. General statements are not acceptable. (Furnish attachments and statements to support findings in Part C, Remarks.)	FSA			LENDER		
	YES	NO	N/A	YES	NO	N/A
1. For SEL's, is there evidence in the file that the lender is supplying FSA an annual analysis report?						
2. For LOC with an SEL, is there documentation in the file that FSA concurred in writing with the lender advancing funds in future years of the line?						
3. For LOC with an SEL, does the cash flow in the file demonstrate a feasible plan?						
4. For CLP lender, is the lender supplying FSA with an annual analysis report and does the lender's summary of their analysis include a comparison of actual to planned performance, any disposition of loan collateral, and prospects for the upcoming cycle?						
5. For LOC with a CLP lender, has the lender certified that a feasible plan has been developed, and that the previous year's income, security and loan funds have been accounted for?						
6. If a loan has been in default, has the lender correctly prepared and submitted FSA-1980-44 as required and has it been entered into GLS?						
7. Has the lender provided FSA-1980-41 semi-annually and have they been completed correctly?						
8. For loans subject to IA, did the lender provide a complete request for payment and continuation of IA and was the request properly reviewed and approved?						
9. For loans that have been sold on the secondary market, does the file contain a copy of FmHA 449-36 or FSA-1980-36, and was it properly completed?						
10A. NAME	10B. TITLE			10C. REVIEWER'S SIGNATURE		

PART C - COMMENTS	
REMARKS: All "NO" answers (and "N/A" when judged necessary by the reviewer) require a detailed explanation of the weaknesses identified in Part B, Items 1 through 9. (Please include the Item No. with each comment.)	